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23973 7590 05/06/2004

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/230,955	05/04/1999	ROBERT JAMES MASON	A-67653/DCA/	3606

TITLE OF INVENTION: ASSESSMENT OF CERVICAL CELLS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	08/06/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
CANELLA, KAREN A	1642	530-388100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2 _____

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Smearchek Limited

London, UNITED KINGDOM

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

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Paul A. Monaco7-27-04

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01 FC:2501	665.00 OP
02 FC:1504	300.00 OP
03 FC:8001	15.00 OP

TRANSMIT THIS FORM WITH FEE(S)

A check in the amount of \$980.00 is enclosed for payment of the issue fee, publication fee and five (5) advance copies of the issued patent. Please charge **Deposit Account No. 50-0573** for any additional fee required or to credit any overcharge to the same deposit account.

Respectfully submitted,

ROBERT JAMES MASON, *ET AL.*

By: 

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